

CLERK OF THE MARION CIRCUIT COURT

Accounting & Child Support Division 200 E Washington Street, W-123 Indianapolis, Indiana 46204 (p) 317.327.4709 Fax 317.327.4813 www.indy.gov/clerk

Payor Child Support Electronic Funds Transfer (EFT) Fact Sheet

New Account: You may have your child support deducted directly from your checking or savings account. To enroll, you must fill out the form called *Electronic Funds Transfer (EFT) Authorization Form.* Please complete this form and submit it to our office along with the following documentation:

- 1. Voided Check or Deposit Slip
- 2. Clear copy of your government issued picture ID

<u>Change Account</u>: If you already have an account, and want to change your savings or checking account number, you must fill out the form called *Electronic Funds Transfer (EFT) Change Form*. You must provide a copy of:

- 1. Voided Check or Deposit Slip
- 2. Clear copy of your government issued picture ID
- 3. Court order if applicable

*It is also the responsibility for the non-custodial parent to fill out a change form if there is a court order changing the amount of the child support payment. You must provide us with the copy of the new child support order.

<u>Close Account</u>: If you choose not to have your child support payment directly deducted from your savings or checking account, you must fill out the form called *Electronic Funds Transfer (EFT) Change Form.* You must also fill out this form if you have a court order to stop paying child support, or if your child has been emancipated. Your account will still be active until you close your account with our office. Your authorization will remain in effect with respect to entries processed by the Clerk prior to the receipt of cancellation; and if monies are distributed to the custodial parent, you will be responsible for repayment of these funds back to the Clerk's office. If you notify your bank to stop electronic funds transfers, but fail to notify the Clerk's office, you will be responsible to pay back all monies disbursed to the custodial party. If your EFT is returned, we will close your account.

General Instructions:

You may submit your form in person, by fax, or by mailing it to our office at the following address:

Marion County Clerk c/o Child Support EFT 200 E. Washington St, W123 Indianapolis, IN 46204

Please be sure to include a voided check or deposit slip and a clear copy of your government issued picture ID with your form. If you have any questions regarding EFT set up, change, or cancellation, you may contact the Clerk's office at 317-327-4709.

^{***}Please allow at least 14 business days for set up of EFT or changes made to your EFT account.***



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Electronic Funds Transfer (EFT) Authorization Form

Name:	Social Security #:		
	Daytime Telephone #:	Cus	stodial Parent's
Name:			
Address:	0	0	7
Street Address	City	State	Zip
Name of Financial Institution:			
Account Type: Checking	☐ Savings Deduction Amount: _		
Account #:	Routing #:		
Please present your identity verification documentation upon completing this form. If mailing this form, please include a clear copy of your verification documentation. Driver's License / State ID Federal ID Other	Attach Voide Deposit S **Must include a voided check	Slip Here	9
Payment Options:	must morage a volueu oneon	Tor deposit slip for set up	•
☐ Weekly (on Friday) ☐ Bi-w	eekly (on Friday)		·
<u>Please Note</u> : If the designated paymer will not begin for at least 15 days after t	nt date falls on a weekend or holiday, the deduction his authorization form is received.	will be effective the next bus	siness day. Deductio
In no case can my cancellation be effectunderstand that if I fail to cancel my aut	athorization will remain in effect until I send my writte ctive with respect to entries processed by the Clerk p horization, and monies are distributed to the custodi I also understand it is my responsibility to provide the	rior to the receipt of cancela al-party, I am responsible fo	ation notification. I br the repayment of
Signature [.]	Da	uto:	